PTO/SB/06 (12-04) Approved for use through 7/31/2008. CMB 0851-0031

U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
the Properties Reduction Act of 1995, no persons are required to respond to a collection of information unives it displays a yield OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I OTHER THAN (Column 1) OR SMALL ENTITY (Column 2) SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATE (T) FEE GI RATE (\$) BASIC FEE FEE (I) NA (37 CFR 1:16(s), (4, o (c)) NI 150.00 NA 300.00 SEARCH FEE · N/A NA (37 CFR 1 16(14, (1, or (m)) NA \$260 NA \$500 **EXAMINATION FEE** NA (A) CFR 1.16(d. (p), or (d) NIA NA \$100 NA **\$20**0 TOTAL CLAMS (07 CFR 1.16(1)) X\$ 25 minus 20 « X\$50 OR MOEPENDENT CLAIMS (37 CFR 1.16(b)) X100 minus 3 = X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 OFR 1.16(4)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(D) +180= +360= "If the difference in column 1 is tess than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PARTIL (Column I) OTHER THAN (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT MILLERED RATE (\$) ADDIthe Hotel AFTER PREVIOUSLY RATE (\$) ADD1 **EXTRA** TIONAL MENDMENT PAID FOR TIONAL FEE (\$) Total FEE (1) Minus αU ENDM D7 OF R LABOUR X\$ 25 X\$50 OR Independent (37 CFR LISP) Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= -+360= OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (1) lδ ADDI-RATE (\$) AFTER ADDI-TIONAL PREVIOUSLY EXTRA TIONAL MENDMENT PAID FOR FEE (S) Total Mirrus. FEE (S) G7 CFR Liter X\$ 25 X\$50 OR Independent P7 CFR LIGHT Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.180) +180± +360₌ OR TOTAL TOTAL "If the entry in column 1 is fest than the entry in column 2, write "O" in column 3.

"If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For" (Total or Independent) is the highest number (cound in the appropriate box in column 1.

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CORESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.